



City of Mt. Juliet

Building Department

Plan Review Application

Original Submittal _____ Addendum/Change Order _____ Shop Drawings _____

PROJECT INFORMATION

DATE: _____

Project Name: _____

Address: _____

Description of Work: _____

Total Square Footage: _____ # Stories: _____ Sprinklered: Yes ☐ No ☐

Const. Type: _____ Occupancy Class: _____ Separated ☐ Non-separated ☐

If additional code information has already been provided as part of the submittal please indicate: _____

APPLICANT INFORMATION

Project Architect: _____ Phone: _____

Project Designer: _____ Phone: _____

Project Applicant: _____ Phone: _____

Contact Information: _____

Please provide an email and appropriate contact person if you would like plan review comments emailed to you. _____

ADDITIONAL INFORMATION
